

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? Yes

(CFA-4) Summary Sheet

FILE NUMBER
491172
TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION	¥		
1 Full Name of Committee (as on Statement of Organization)		- 1	
Committee to Elect Shelf A. CARliste GR Superi	OR COUR	+ JUDIE	
2 Acronym or Abbreviated Name (if any)		ittee Telephone Number	
	(1	
4. Mailing Address (address where all campaign finance correspondence is received)	Check if this	is a new address	
662) King John CT			
5 City, State, ZIP Code	6. Party A	Affiliation (if applicable)	
INDIANAPOLIS, IN 46227	REP	ublican	
CANDIDATE INFORMATION (For Candidate's	Committee	s Only)	
7 Full Name of Candidate (include any nickname)	8. Party A	Affiliation or If Independent	Candidate
Sheila A. Cartiste	RE	PubliCAN	
9. Office Sought (Include district number, if any. Not required for exploratory committee.)		ty of Residence	
MARION SUPERIOR COURT JUDGE	JV)	ARIOH	
TYPE OF REPORT		CONVENTION	CANDIDATES ONLY
11. Check one:		Check one:	_
Pre-Primary Pre-Election X Annual Nomination Other		Pre-Conve	ntion
Final/Disbands Committee (fines 18, 19, and 20 must be "0") Utgoing Treasurer (within 10 days amend Statemen	nt of Organization)	Post-Conv	ention
12. Reporting Period:		COLUMN A	COLUMN B
From: 1/1/15 Through: 12/31/15		This Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period		237.97	
14. Cash on hand and investments January 1, current year			237.97
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions)			
15a. Itemized (use Schedule A)		850.00	850.00
15b. Unitemized		_	
	BTOTAL	850.00	850.00
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL	1087.97	1087.97
EXPENDITURES			:
(Note These amounts include in-kind expenditures and loan repayments)			
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		710.00	910,00
17b. Uniternized			
17c. Add lines 17a and 17b in both columns	BTOTAL	910.00	910,00
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	177.97	177.97
19. Debts OWED BY the committee (use Schedule D)		15,950.00	
20. Debts OWED TO the committee (use Schedule E)			
CERTIFICATION	4.		R OFFICE USE ONLY
CERTIFICATION	TOUR COORE		IN OFFICE USE UNLI

CERTIFY THAT I HAVE EXAMINED THIS STATEMENT TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE. CORRECT AND COMPLETE Signature of Treasurer

Title

RE ASURE R

Date | 18/16

Date | 40/14

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose (IC 3-9-4-5) A person who knowingly

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D felony (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

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JAN 2 0 2016

Myla a Eldridge 822AM GY

CFA-4 Schedule A-1 Contributions by Individuals Itemized Contributions and Other Receipts

FILE NUMBER			
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Page .	_2_	of	_11_

		Column A	Column B	Date Received
Contributors Full Name and Occupation Full Mailing Address	Type of Contribution or Other Receipt	Amount This Period	Cumulative Year to Date	Received By
Sheila Carlisle	Contributions:		<u> </u>	
6621 King John Court	Direct			
Indianapolis, IN 46227	_X_In-Kind (describe)			Various
	Cash			7 3.1040
	Other Receipts:			
	Interest Loan			
	Misc (specify)	\$ 850.00	\$ 850.00	James Art
Contributors Occupation: Marion Superior Court Judge				
	Contributions:			
	Direct			į
	In-Kind (describe)			
	1			
	Other Receipts:			
	Interest Loan			
	Misc (specify)			
Contributors Occupation: Marion Superior Court Judge				
	Contributions:			
	Direct			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Misc (specify)			
Contributors Occupation	1	ļ		
	Contributions:			
	Direct			
	In-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Misc (specify)			
Contributors Occupation.	<u></u>	L		·
	Contributions:			
	Direct]
	In-Kind (describe)			Ì
	Other Receipts:			· · · · · · · · · · · · · · · · · · ·
	Interest Loan			
	Misc (specify)			
Contributors Occupation:	<u></u>			



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1.	Contributions: Direct In-Kind (describe)	PERIOD	TCANG-DATE	
	Other Receipts: Interest Loan Misc. (specify)			
2.	Contributions: Direct In-Kind (describe)			
	Other Receipts: interest Loan Misc. (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
SUBTO	AL THIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDU	ILE A ON THE LAST PAGE ONLY ITEM 15a of the Summary Sheet	\$ 0		



(CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from labor organizations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee) All cumulative receipts, (such as loan proceeds and repayments, refunds, rebales, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year. MUST be itemized on this schedule (over \$200 if regular party committee).

	FILE NUMBER	
	491172	
Page _	4 of 11	1

CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
t.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
2	Contributions: Direct tn-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
3.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
4,	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
5 .	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
	THIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDUL (Enter total on IT	A ON THE LAST PAGE ONLY EM 15a of the Summary Sheet)	\$ 0		



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(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts lotated on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee) All transfers in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee)

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CONTRIBUTOR'S F FULL MAILING (street, number, city	ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
f.		Contributions: Direct In-Kind (describe)	, ENOD		
		Other Receipts: Interest Loan Misc. (specify)			
2.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)			
3.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)			
4.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc (specify)			
5.		Contributions: Direct In-Kind (describe)			
		Other Receipts: Interest Loan Misc. (specify)			
	CURTOTAL	THE BACE OF SOURCE			
TOTAL OF	ALL PAGES OF SCHEDULE A	HIS PAGE OF SCHEDULE A A ON THE LAST PAGE ONLY I 15e of the Summary Sheet)	s 0		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY DRGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or annt legibly IN BLACK INK all information on this schedule for assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts (caled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contribution within a calendar year MUST be termized on this schedule (over \$200), if regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rehales, returns of deposit, proceeds from sales, inferest or other income) OVER \$100 per contribution, within a calendar year. MUST be itemized on this schedule (over \$200 if regular party committees).

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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN 8 CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
2.	Contributions: Direct In-Kind (describe)	N. mid-		
	Other Receipts: Interest Loan Misc. (specify)			
J.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)		ļ	
4.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
5.	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
SUBTOTAL T	HIS PAGE OF SCHEDULE A	\$		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM	ON THE LAST PAGE ONLY 1 15a of the Summary Sheet)	\$ O		

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Recipient's Name and Mailing Address	Recipient's Occupation Office Sought	Type of Expenditure and Purpose	Column A Amount This Period	Column B Cumulative Year to Date	Date of Expenditure
Code C					
GIRWC 610 Midnight Ct. Indianapolis, IN 46239		DirectX_In-Kind Payment of Debt Returned Contribution Other			
		Purpose: Holiday Lunch	\$ 50.00	\$ 50.00	12/14/2015
Code O JP Morgan Chase Bank Indiana Market P.O. Box 260180 Baton Rouge, LA 70826		X_Directin-KindPayment of DebtReturned ContributionOther			
		Purpose: Monthly Bank Fees	\$ 60.00	\$ 60.00	Various
Code C Wayne GOP Club 5545 W. Marnette St. Indianapolis, IN 46241		Direct X In-Kind Payment of Debt Returned Contribution Other			
		Purpose: Donation	\$ 50.00	\$ 50.00	9/16/2015
Code C Perry GOP Club 7303 Rooses Way Indianapolis, IN 46217		Direct _X_ In-Kind Payment of Debt Returned Contribution Other			
		Purpose: Lincoln Day Dinner	\$ 100.00	\$ 100.00	2/12/2015
Code C Northeast GOP 7326 Elm Ridge Drive Lawrence, IN 46236		DirectX_ In-Kind Payment of Debt Returned Contribution Other			
		Purpose: Lincoln Day Dinner	\$ 100.0 0 °	\$ 100.00	2/6/2015
Code C Warren GOP Club 8255 Rawles Avenue Indianapolis, IN 46219		Direct _X_In-Kind Payment of Debt Returned Contribution Other			
	r	Purpose: Lincoln Day Dinner	\$ 100.00	\$ 100.00	1/21/2015

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Panisiant's Name and Welling & Class]	Column A	Column B		
Recipient's Name and Mailing Address	Recipient's Occupation	Type of Expenditure	Amount This		Date of	
	Office Sought	and Purpose	Period	Year to Date	Expenditure	
Code C		r		,		
Washington TWP GOP Club		Direct _X_ In-Kind	ļ			
701 Warwick Rd		Payment of Debt				
Indianapolis, IN 46220	1	Returned Contribution	ļ	Į (ļ	
indianapolis, in 46220		Other]	i		
		Purpose:	•	i	}	
	į.	Lincoln Day Dinner	\$ 100.00	\$ 100.00	2/19/2015	
					2,10,2010	
Code C		Direct _X In-Kind				
Pike GOP Club		Payment of Debt		l i	ļ	
8721 Shetland Lane		Returned Contribution	•			
Indianapolis, IN 46278		Other				
			}			
	1	Purpose:	Ì	ì i		
	1	Lincoln Day Dinner	\$ 100.00	\$ 100.00	3/10/2015	
Code C	 			 		
Wayne GOP Club	i	Direct _X_ In-Kind	1	1	ì	
5545 W. Marnette Street	1	_ Payment of Debt				
Indianapolis, IN 46241	}	Returned Contribution			:	
100000000000000000000000000000000000000	ļ	Other	ļ	ļ [i	
	1	Purpose:	}			
	1	Lincoln Day Dinner	\$ 100.00	\$ 100.00	1/17/2015	
		Circom Day Dinner	Ψ 100.00	100.00	1/1/12015	
Code C	 	Direct _X_In-Kind		 		
MCRCC		Payment of Debt	ļ			
47 S. Pennsylvania St		Returned Contribution		l į	Į	
Ste 300	L	_ Other		i		
Indianapolis, IN 46204				ļi		
		Purpose:			Ī	
		Reagan Dinner	\$ 100.00	\$ 100.00	6/25/2015	
Code C	 	Direct _X_ In-Kind	<u> </u>	 		
MCRCC		Payment of Debt			ľ	
47 S. Pennsylvania St	ì	Returned Contribution		}]	
Ste 300		Other		1		
Indianapolis, IN 46204		_ ~~~				
•		Purpose:] 1		
		Holiday Lunch	\$ 50.00	s 50.00 l	11/18/2015	
<u> </u>	_	=		! ' !		

Sub Total This Page

450.00

Total of All Pages of Schedule B

\$ 910.00



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES For Public Questions

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

	FILE NUM	1BER	
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F	Page <u>' /</u>	of	

		Page of
PUBLIC G Enter Text of Public Question	UESTION INFORMATION	
Type of Question: Statewide Local Position: Supported Dopposed		
REC'PIENT'S NAME AND MAILING ADDRESS RECIPIENT'S OCCUP (street, number, city, state, ZIP code)	ATION TYPE OF EXPENDITURE COLUMN A and AMOUNT THE PURPOSE (the specific) PERIOD	COLUMN B DATE OF CUMULATIVE EXPENDITURE
Code	☐ Direct ☐ In-Kind ☐ Payment of Debt ☐ Returned Contribution ☐ Other Purpose:	
Cade	Direct (n-Kind) Payment of Debt Returned Contribution Other Purpose:	
Code	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	
Code	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	
Code	Direct in-Kind Payment of Debt Returned Contribution Other Purpose:	
Code	Direct in-Kind Payment of Debt Returned Contribution Other Purpose	
	THIS PAGE OF SCHEDULE C \$	
TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITE	C ON THE LAST PAGE ONLY S O	



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(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK tNK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, <u>regardless of the amount</u>, **OWED BY** the committee during the reporting period, include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

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GREDITOR'S OR LENDER'S NAME & MALING ADDRESS (street, number city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (If any) (street, number, city, state, ZIP code)	AMOUNT	DATE DEBT INCURRED	CUMULATIVE PA'D YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Sheila A. CARlisle			·		
6621 King Tohn CT		15,956			
Endianapolis, IN 46227		LOAN	VARIOUS		15,950
LENDER'S OCCUPATION JUDGE		LUAN	are to the distribution of the state of the		
LENDER'S OCCUPATION					
			;		
LENDER'S OCCUPATION					
	:				
LENDER'S OCCUPATION					
		.,			
LENDER'S OCCUPATION:					
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				F SCHEDULE D	\$
	TOTAL OF ALL	PAGES OF SCHEDULI (Enter total on I	E D ON THE LA TEM 19 of the S	ST PAGE ONLY ummary Sheet)	\$ 15,450



(CFA-4 SCHEDULE E) DEBTS OWED TO THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED TO the committee during the reporting period, include all amounts the committee has loaned to others.

	FILE	NUMBE	R	
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BORROWER'S NAME & MAILING ADDRESS Istreet, number, city, state, ZIP code)	CO-SIGNER'S NAME 8 MAILING ADDRESS (if any) (street number city, state, ZIP code)	ORIGINAL AMOUNT	DATE DEBT INCURRED	CUMULATIVE PA D YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
	•				•
		SUBTOTA	L THIS PAGE OI	SCHEDULE E	s
TOTAL OF ALL PAGES OF SCHEDULE E ON THE LAST PAGE ONLY (Enter total on ITEM 20 of the Summary Sheet)				s 0	